

County: Kewaunee
 ALGOMA LONG TERM CARE UNIT
 1510 FREMONT STREET

Facility ID: 1030

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ALGOMA 54201 Phone: (920) 487-5511

Operated from 1/1 To 12/31 Days of Operation: 366

Operate in Conjunction with Hospital? No

Number of Beds Set Up and Staffed (12/31/00): 63

Total Licensed Bed Capacity (12/31/00): 63

Number of Residents on 12/31/00: 50

Ownership:

Highest Level License:

Operate in Conjunction with CBRF?

Title 18 (Medicare) Certified?

Average Daily Census:

City

Skilled

No

Yes

56

Services Provided to Non-Residents		Age, Sex, and Primary Diagnosis of Residents (12/31/00)				Length of Stay (12/31/00)		%	

Home Health Care	No	Primary Diagnosis	%	Age Groups	%	Less Than 1 Year	24.0		
Supp. Home Care-Personal Care	No	-----		-----		1 - 4 Years	44.0		
Supp. Home Care-Household Services	No	Developmental Disabilities	2.0	Under 65	4.0	More Than 4 Years	32.0		
Day Services	No	Mental Illness (Org./Psy)	18.0	65 - 74	8.0		----		
Respite Care	No	Mental Illness (Other)	22.0	75 - 84	30.0		100.0		
Adult Day Care	No	Alcohol & Other Drug Abuse	0.0	85 - 94	48.0	*****			
Adult Day Health Care	No	Para-, Quadra-, Hemiplegic	2.0	95 & Over	10.0	Full-Time Equivalent			
Congregate Meals	No	Cancer	2.0		----	Nursing Staff per 100 Residents			
Home Delivered Meals	No	Fractures	10.0		100.0	(12/31/00)			
Other Meals	No	Cardiovascular	10.0	65 & Over	96.0	-----			
Transportation	No	Cerebrovascular	12.0	-----		RNs	11.3		
Referral Service	No	Diabetes	2.0	Sex	%	LPNs	10.3		
Other Services	No	Respiratory	2.0	-----		Nursing Assistants			
Provide Day Programming for Mentally Ill	No	Other Medical Conditions	18.0	Male	26.0	Aides & Orderlies	39.0		
Provide Day Programming for Developmentally Disabled	Yes		100.0	Female	74.0		----		
					100.0		-----		

Method of Reimbursement

Level of Care	Medicare (Title 18)			Medicaid (Title 19)			Other			Private Pay			Managed Care			Percent Of All Residents	
	No.	%	Per Diem	No.	%	Per Diem	No.	%	Per Diem	No.	%	Per Diem	No.	%	Per Diem		Total
			Rate			Rate			Rate			Rate			Rate		
Int. Skilled Care	0	0.0	\$0.00	1	2.7	\$112.02	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	1	2.0%
Skilled Care	1	100.0	\$203.48	36	97.3	\$94.73	0	0.0	\$0.00	12	100.0	\$118.45	0	0.0	\$0.00	49	98.0%
Intermediate	---	---	---	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Limited Care	---	---	---	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Personal Care	---	---	---	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Residential Care	---	---	---	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Dev. Disabled	---	---	---	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Traumatic Brain Inj.	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Ventilator-Dependent	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Total	1	100.0		37	100.0		0	0.0		12	100.0		0	0.0		50	100.0%

Admissions, Discharges, and Deaths During Reporting Period		Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/00				
				% Needing Assistance of	% Totally Dependent	Total Number of Residents
Percent Admissions from		Activities of	%	One Or Two Staff		
Private Home/No Home Health	3.9	Daily Living (ADL)	Independent			
Private Home/With Home Health	3.9	Bathing	0.0	34.0	66.0	50
Other Nursing Homes	19.6	Dressing	0.0	58.0	42.0	50
Acute Care Hospitals	62.7	Transferring	0.0	56.0	44.0	50
Psych. Hosp. -MR/DD Facilities	0.0	Toilet Use	0.0	56.0	44.0	50
Rehabilitation Hospitals	0.0	Eating	50.0	28.0	22.0	50
Other Locations	9.8	*****				
Total Number of Admissions	51	Continence	%	Special Treatments		%
Percent Discharges To:		Indwelling Or External Catheter	16.0	Receiving Respiratory Care		14.0
Private Home/No Home Health	12.9	Occ/Freq. Incontinent of Bladder	64.0	Receiving Tracheostomy Care		0.0
Private Home/With Home Health	9.7	Occ/Freq. Incontinent of Bowel	58.0	Receiving Suctioning		2.0
Other Nursing Homes	0.0			Receiving Ostomy Care		8.0
Acute Care Hospitals	6.5	Mobility		Receiving Tube Feeding		4.0
Psych. Hosp. -MR/DD Facilities	0.0	Physically Restrained	18.0	Receiving Mechanically Altered Diets		60.0
Rehabilitation Hospitals	0.0					
Other Locations	21.0	Skin Care		Other Resident Characteristics		
Deaths	50.0	With Pressure Sores	6.0	Have Advance Directives		84.0
Total Number of Discharges		With Rashes	4.0	Medications		
(Including Deaths)	62			Receiving Psychoactive Drugs		66.0

Selected Statistics: This Facility Compared to All Similar Rural Area Facilities & Compared to All Facilities

	Ownership:			Bed Size:		Licensure:		All	
	This Facility			50- 99		Skilled		Facilities	
	%	Peer Group	Ratio	%	Ratio	%	Ratio	%	Ratio
Occupancy Rate: Average Daily Census/Licensed Beds	88.9	87.0	1.02	85.4	1.04	84.1	1.06	84.5	1.05
Current Residents from In-County	84.0	75.8	1.11	72.9	1.15	76.2	1.10	77.5	1.08
Admissions from In-County, Still Residing	19.6	28.9	0.68	21.3	0.92	22.2	0.88	21.5	0.91
Admissions/Average Daily Census	91.1	81.9	1.11	101.3	0.90	112.3	0.81	124.3	0.73
Discharges/Average Daily Census	110.7	83.2	1.33	101.3	1.09	112.8	0.98	126.1	0.88
Discharges To Private Residence/Average Daily Census	25.0	32.1	0.78	37.6	0.66	44.1	0.57	49.9	0.50
Residents Receiving Skilled Care	100	88.8	1.13	89.6	1.12	89.6	1.12	83.3	1.20
Residents Aged 65 and Older	96.0	89.7	1.07	93.4	1.03	94.3	1.02	87.7	1.09
Title 19 (Medicaid) Funded Residents	74.0	69.4	1.07	69.0	1.07	70.1	1.06	69.0	1.07
Private Pay Funded Residents	24.0	20.1	1.19	23.2	1.03	21.4	1.12	22.6	1.06
Developmentally Disabled Residents	2.0	0.8	2.64	0.9	2.13	0.9	2.18	7.6	0.26
Mentally Ill Residents	40.0	47.5	0.84	41.5	0.96	39.6	1.01	33.3	1.20
General Medical Service Residents	18.0	15.2	1.18	15.4	1.17	17.0	1.06	18.4	0.98
Impaired ADL (Mean)	67.2	50.7	1.33	47.7	1.41	48.2	1.40	49.4	1.36
Psychological Problems	66.0	58.0	1.14	51.3	1.29	50.8	1.30	50.1	1.32
Nursing Care Required (Mean)	12.3	6.9	1.77	6.9	1.77	6.7	1.82	7.2	1.71